

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

NRCC-CAC Nevada Republican Liberty Caucus Candidate Advocacy Committee

Name (print) 311 S. Valley View Blvd Office (if applicable)

702 385-3320 District (if applicable)

Mailing Address (include city and zip code)

Las Vegas NV 89102

Telephone No.

E-Mail Address

gappone@cox.net

Select Appropriate Box(es) ☐ CANDIDATE ☒ PAC ☐ BAG ☐ POL PRY ☒ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ Annual Filing - Due January 15, 2004

Period: January 1, 2003 - December 31, 2003

☐ Report #1 - Due August 31, 2004

Incumbents in an Office with a 4-year term

Period: Jan. 5, 2001 - Aug 26, 2004

Incumbents in an Office with a 6-year term

Period: Dec. 20, 1998 - Aug 26, 2004

All others

Period: Jan. 1, 2004 - Aug 26, 2004

Ballot Advocacy Groups (BAGs) only:

Period: Dec. 5, 2002 - Aug 26, 2004

☐ Report #2 Due - October 26, 2004

Period: Aug. 27, 2004 - Oct. 21, 2004

☒ Report #3 Due - January 15, 2005

Period: Oct. 22, 2004 - Dec. 31, 2004

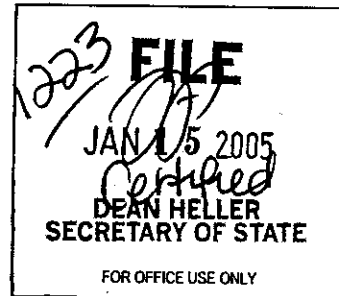
BAGs only:

Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2



CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100

This Period: \$10,000.00 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$10,000.00

2. Total Monetary Contributions Received of \$100 or Less

This Period: 0 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: 0

3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)

This Period: \$10,000.00 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$10,000.00

4. Total Value of In Kind Contributions Received in Excess of \$100

This Period: \$12,152.00 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$12,152.00

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

This Period: \$9,654.43 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$9,654.43

6. Total Monetary Expenses Paid of \$100 or Less

This Period: \$345.57 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$345.57

7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)

This Period: \$10,000.00 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$10,000.00

8. Total Value of In Kind Expenses in Excess of \$100

This Period: \$12,152.00 Cumulative From Beginning of Report Period #1 through End of This Reporting Period: \$12,152.00

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Date

Report Period # 3

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

[illegible]

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CAMPAIGN EXPENSES

Report Period # 3

NRLC - CAC (Nevada Republican Liberty Caucus - Candidate Advocacy Committee)

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

CAMPAIGN EXPENSES

Report Period # 7

Name (print) NRLE-CAC (New Mexico Republican Liberty Caucus Candidate Advocacy Committee) Office (if applicable) District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
USPS Bulk Mail Unit 1001 E. Sunset Rd Las Vegas NV 89119	D	Sept 04	7,654 ⁴³

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Report Period # 3

District (if applicable)